



thetrutides

GLOW BLEND

GHK-Cu + BPC-157 + TB-500 — skin, hair and recovery

UPDATED 4 AUGUST 2026

GLOW adds a copper peptide with a genuine cosmetic-science literature to the standard recovery pairing. It is the one blend in the range where a component has decades of published dermatological research behind it.

● In Plain English

GHK-Cu is a small copper-carrying peptide that occurs naturally in human plasma and declines steadily with age. It has been used in skincare for decades and has the most credible research base of anything in this blend. Adding it to the recovery pairing is aimed at the visible side of repair — skin quality, hair, connective tissue — rather than the joint and tendon side alone.

What people use it for. The cosmetic side of repair — skin quality, fine lines, hair, and general tissue recovery. It is the blend people choose when appearance matters as much as joint function.

What to know before you buy. GHK-Cu is the standout component and has the best research behind it of anything in this range, but most of that research is on creams applied to skin rather than injection — worth knowing, because the two are often conflated in marketing. The solution will be deep blue from the copper; that is normal and not a fault. Note also that GHK-Cu has not yet had its FDA review, which is expected sometime before the end of February 2027.

● What It's Used For

GOAL	WHAT THAT RESTS ON
Skin firmness and fine lines	GHK-Cu has controlled human topical studies reporting improved firmness and elasticity
Collagen support	GHK-Cu stimulates collagen and glycosaminoglycan production in skin fibroblasts
Hair support	A smaller but real body of GHK-Cu follicle research
Recovery underneath it	The BPC-157 and TB-500 base, same as Wolverine

The left column lists goals people commonly pursue with this compound; the right column states what that rests on. These are described uses and research findings, not proven outcomes or treatment claims. Individual results vary and no outcome is promised.



● Pricing & Sizes

PRICING

70mg vial

Bulk pricing: 2-3 vials -5% | 4-6 vials -10% | 7-9 vials -15% | 10+ vials -20%

Ships sealed and lyophilized — stable for years at room temperature, reconstitute before use, or ask and it will be reconstituted free at the volume shown below. **Free shipping on every order, no minimum.** Third-party COA available for every batch — HPLC purity and mass spec verification.

\$100

Reconstitution — bacteriostatic water: 70mg vial at 3mL = 23.3mg/mL, so 10 units on a 100-unit syringe draws 2.33mg. Concentrations are arithmetic from vial content and diluent volume, not a dosing recommendation.

Bought separately, GHK-Cu 50mg (\$35) plus BPC-157 10mg (\$48) is \$83. GLOW is \$100, so the extra 10mg of TB-500 costs \$17 — and TB-500 is not sold on its own.

● Also Available in These Blends

BLENDS CONTAINING GLOW BLEND

KLOW 80mg — adds KPV

Bulk pricing: 2-3 vials -5% | 4-6 vials -10% | 7-9 vials -15% | 10+ vials -20%

Same peptide, supplied alongside others in a single vial. **Ships sealed and lyophilized** — stable for years at room temperature, reconstitute before use, or ask and it will be reconstituted free at the volume shown below. **Free shipping on every order, no minimum.** Third-party COA available for every batch — HPLC purity and mass spec verification.

\$110

● At a Glance

COMPONENTS	GHK-Cu, BPC-157 and TB-500
RATIONALE	Skin and connective tissue support (GHK-Cu) layered onto the two-peptide recovery base
GHK-CU EVIDENCE	The strongest of the three — substantial published dermatological and wound-healing literature, including human topical studies
REGULATORY (US)	No component is FDA-approved. BPC-157 and TB-500 were recommended for 503A listing 23 July 2026 with no FDA action since; GHK-Cu was not on that agenda
GHK-CU TRACK	Scheduled for a separate PCAC meeting expected before the end of February 2027
FORMAT	70mg vial

3 ACTIVE PEPTIDES	Feb 2027 GHK-CU PCAC DATE	8-6-1 BPC-157 & TB-500 VOTE	0 STUDIES OF THE BLEND
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REGULATORY STATUS — READ THIS FIRST

Two of the three components — BPC-157 and TB-500 — were recommended **8-6-1** for the 503A bulks list on 23 July 2026. That vote is **advisory only**. As of 4 August 2026 the FDA has taken no action on it, has not opened rulemaking, and has not moved the substance to the interim Category 1 list. FDA's own scientific reviewers had recommended *against* all seven peptides; the committee voted against staff on six consecutive votes, so the usual assumption that a PCAC recommendation predicts the agency's decision is weaker here than normal. **GHK-Cu was not on that agenda** and is queued for a separate PCAC meeting expected before the end of February 2027. Do not read the July outcome as covering the copper peptide component. Several outlets have reported this as the FDA “clearing”, “approving” or “adding” these peptides to the bulks list. That is inaccurate. Nothing has been added and nothing is legally cleared.

● How the Components Compare

Each component brings something the others do not — and each has gaps the others fill. This is what is actually in the vial, stated plainly:

COMPONENT	WHAT IT ADDS	WHAT IT DOES NOT DO
GHK-Cu	The only component with controlled human studies. Brings collagen synthesis, skin firmness and hair support — the visible side the other two do not touch	Strongest evidence is topical rather than injectable. Does not target tendon or joint repair
BPC-157	Adds the broad tissue-repair signal, including gut, which GHK-Cu does not provide	No skin firmness or collagen role. No completed human trial
TB-500	Adds cell migration and tissue remodelling	No direct research of its own. Nothing for skin or inflammation

● Component Breakdown

COMPONENT	WHAT THE RESEARCH SUPPORTS	EVIDENCE STRENGTH
GHK-Cu	Collagen synthesis, wound healing, antioxidant activity, skin remodelling; human topical data exists	Strongest of the three
BPC-157	Broad tissue repair signal across animal models	Deep animal base, near-absent human data
TB-500	Inferred from Tβ4 rather than studied directly	Weakest of the three

As with all blends here, the combination itself has not been studied. What you can reasonably say is that each component has an individual rationale; what you cannot say is that the combination has been shown to outperform any single component.

● Two Regulatory Tracks, Not One

This is the practical point that most coverage gets wrong. GLOW straddles two separate FDA processes running on different timelines. The BPC-157 and TB-500 components sit behind a July 2026 recommendation awaiting agency action; GHK-Cu has not yet been reviewed at all. Neither is resolved, and they will not resolve together.

Section 503A permits a pharmacy to compound with a bulk substance only if it is a component of an approved drug, is subject to a USP monograph, or appears on the 503A bulks list. These peptides meet none of the three today. FDA removed them from Category 2 in April 2026 when the nominations were withdrawn, but as Polsinelli noted, Category 2 removal does not by itself confer Category 1 interim enforcement discretion.

THE BOTTOM LINE

The blend with the most credible single component. GHK-Cu's dermatological literature is real and predates the current peptide wave by decades. The other two components carry the same caveats they carry everywhere else, and the copper peptide's own regulatory review is still months away.

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